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PTO/SB/01 (10-00)

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DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing <input checked="" type="checkbox"/> Declaration Submitted after OR Initial Filing	Attorney Docket Number	ARC 2817 R1	
	First Named Inventor	William Van OSDOL et al.	
	<i>COMPLETE IF KNOWN</i>		
	Application Number	09/361,026	
	Filing Date	July 23, 1999	
	Group Art Unit	1616	
	Examiner Name	DODSON, Shelly A.	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.
 I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

NOVEL FORMULATIONS FOR THE TRANSDERMAL ADMINISTRATION OF FENOLDOPAM
(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **07/23/1999** as United States Application Number **09/361,026**

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/094,059	07/24/98	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status

I hereby appoint:

☒ Practitioners at Customer Number **000027777**

AND

☒ Practitioner(s) named below:

Name	Registration Number
Vandana Date	38,675
Robert R. Neller	46,950
Angela Nwaneri	34,229
Samuel E. Webb	44,394

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Vandana Date at telephone number (650) 564-5909, fax number (650) 564-2195

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Direct all correspondence to:	<input checked="" type="checkbox"/> or Bar Co de Label 000027777	OR <input type="checkbox"/> Correspondence address below
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) William W.		Family Name or Surname van Osdol	
Inventor's Signature <i>William W. van Osdol</i>		Date August 26, 2003	
Residence: City Mountain View	State CA	Country USA	Citizenship USA
Mailing Address 1662 Cornell Drive			
City Mountain View	State CA	ZIP 94040	Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Nieves M.		Family Name or Surname Crisologo	
Inventor's Signature <i>Nieves M. Crisologo</i>		Date August 27, 2003	
Residence: City Sunnyvale	State CA	Country USA	Citizenship USA
Mailing Address 787 Madrone Avenue			
City Sunnyvale	State CA	ZIP 94085 <i>and 94086</i>	Country USA

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NAME OF THIRD INVENTOR:		<input checked="" type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Su I		Family Name or Surname Yum	
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Residence: City Los Altos	State CA	Country USA	Citizenship USA
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

Given Name

(first and middle (if any)) William W.

Family Name

or Surname van Osdol

Inventor's
Signature

William W. van Osdol

Date August 26, 2003

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NAME OF SECOND INVENTOR:

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(first and middle (if any)) Nieves M.

Family Name

or Surname Crisologo

Inventor's
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Date August 27, 2003

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ZIP ~~94086~~ ⁹⁴⁰⁸⁵ ₈₁₂₁₉ Country USA

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NAME OF THIRD INVENTOR:

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